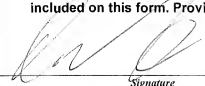


AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 01093 (BLL-0271)	
Applicant(s): JOHN P. RUCKART						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
10/086,338	March 1, 2002	Lisa Hashem	36192	2614	4121	
Invention: TELEPHONE HOLD FEATURE						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	15 -	20 =	0	x \$52.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0	x \$220.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;">  <i>Signature</i> </div> <div> Dated: December 16, 2008 </div> </div>						
David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 20 Church Street, 22nd Floor Hartford, CT 06103-3207 Telephone 860-286-2929 Facsimile 860-286-0115 Customer No. 36192			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ <div style="text-align: center;">(Date)</div> <div style="text-align: center;">_____ <i>Signature of Person Mailing Correspondence</i></div> <div style="text-align: center;">_____ <i>Typed or Printed Name of Person Mailing Correspondence</i></div>			
CC:						